

**EMERGENCY SHELTER AND  
HOMELESS COORDINATION COMMISSION  
ANNUAL REPORT  
*JULY 1, 2001–JUNE 30, 2002***

One person's trash...



...may be a homeless person's bed.

**NEW HAMPSHIRE  
DEPARTMENT OF HEALTH & HUMAN SERVICES  
DIVISION OF BEHAVIORAL HEALTH**

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*Photos appearing in this report are courtesy of Justine Shea (Rockingham Community Action Program), Raysa Ortega (Families in Transition), Marcella Hinkell (Community Action Program, Belknap-Merrimack Counties), Bill Guinther (New Hampshire Housing Finance Authority), and Arnie Alpert (American Friends Service Committee).*

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## Letter from the Chair

Dear Friends,

On behalf of New Hampshire's Emergency Shelter and Homeless Coordination Commission, once again it is my privilege to present this Annual Report for State Fiscal Year 2002, which ended June 30<sup>th</sup>.

Although its population growth rate continues to lead New England, our state has not escaped the recession tightening its grip on our nation in the past year. The number of homeless persons served by our Greater Manchester, Greater Nashua, and Balance of State Continuums of Care, with their emphasis on community-based prevention activities, continues to increase.



In the past year, much justifiable recognition has been paid to "America's heroes," the public servants in our police and fire departments whose bravery and sacrifice in New York City overshadowed some of the horror of September 11<sup>th</sup>, 2001. To the ranks of such heroes the Granite State might add the names of dozens of equally dedicated provider staff and volunteers who continue to battle a less dramatic foe, our persistent challenge of homelessness. With few resources and little public recognition, New Hampshire's homeless assistance heroes labor tirelessly to shelter and assist our community's less fortunate members. This report discusses some of their work, detailing the activity of homeless assistance programs funded through the State of New Hampshire, Department of Health and Human Services, Division of Behavioral Health.

The Commission deeply respects and commends the work of New Hampshire's homeless assistance heroes, whether they work in local government or for nonprofit organizations. Together, they personify this State's compassion and care for its abused, addicted, mentally ill, or economically disadvantaged homeless population.

As always, we gratefully acknowledge the leadership and support provided by Governor Jeanne Shaheen, members of the Executive Council and General Court, and the citizens of New Hampshire, who have not forgotten those community members touched by the tragedy of homelessness.

Sincerely,

Harold R. Acres  
Chair

# **Emergency Shelter and Homeless Coordination Commission**

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## Executive Summary

This Emergency Shelter and Homeless Coordination Commission Report for state fiscal year (SFY) 2002, 01 July 2001 to 30 June 2002, includes information on homeless programs administered by the New Hampshire Department of Health and Human Services, Division of Behavioral Health, Office of Homeless and Housing Services (OHHS). All homeless activities undertaken by the State are accomplished through contracts to nonprofit providers statewide with guidance from the Emergency Shelter and Homeless Coordination Commission. Funding for state-supported homeless activities is provided by the State of New Hampshire, the US Department of Housing and Urban Development (HUD), and the US Department of Health and Human Services.



*Our cover. Two families lived in this Portsmouth clearing for a summer. (Photo by Justine Shea)*

Population and Median Family Income (MFI) continued to rise in SFY '02, as did New Hampshire's emergency shelter activities, driven by the State's persistent shortage of affordable housing. This shortage is indicated in two ways:

1. A statewide rental vacancy rate for two-bedroom apartments holding at a statistically negligible rate of less than 1% (equivalent to "no vacancy") and median statewide two-bedroom gross rents that rose 8.1% to \$884. This is a faster rate of increase than the 5.7% rise posted the year before. Significantly, in 2002 only 11.7% of the State's two-bedroom apartments were affordable to very low and extremely low-income households, according to the New Hampshire Housing Finance Authority, a drop of nearly 7% from the prior year. Once again, less than *half of one percent* of those apartments were affordable to those with extremely low incomes, defined for 2002 as \$15,876, or 30% of the HUD statewide Median Family Income adjusted for a three-person household. (The minimum wage equates to an income of \$10,712 per year.)

2. A statewide real-estate market so active that by the first half of SFY '02 all current listings were being absorbed in approximately four months, propelling the median purchase price paid for new homes in New Hampshire in calendar 2001 (the last year with complete data) to \$242,533, and \$162,000 including existing homes. For SFY 2002, the Office of Federal Housing Enterprise Oversight reports that New Hampshire ranked fifth nationally in statewide home-price appreciation rates, showing a gain of 10.87%.

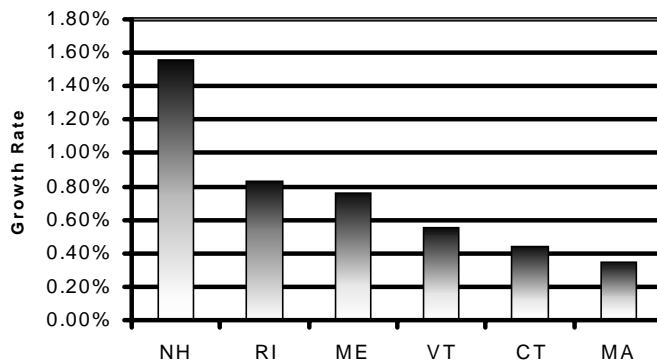
New Hampshire's continuing housing squeeze has resulted in significantly higher demand on its temporary homeless shelters and services in SFY '02. Although their overall bed capacity increased nearly 24%, state-funded shelter providers reported an 8.5% increase in persons receiving temporary housing (emergency or transitional) to 6,805. However, unmet need for shelter rose an astonishing 48.5% from the prior year, evidenced by another 13,548 homeless persons who had to be turned away from state-funded shelters at full capacity. (Coincidentally, the number of clients assisted by the state-funded New Hampshire Homeless Hotline rose 54.2% in SFY '02.) Moreover, the number of bednights (*i.e.*, one person sheltered one night) provided rose 6.4% to 254,290. In the year's only positive statistical change, the average length of shelter stay eased slightly to 37.4 days, down from 38.1 days last year.

Nine permanent housing programs for New Hampshire homeless persons with disabilities were funded through the HUD-funded Special Needs Assistance Programs. Eight of these programs served persons with serious mental illness and one program housed those with Acquired Brain Disorder, collectively assisting 93 homeless persons with disabilities in SFY '02. Other homeless programs assisted 291 individuals infected with HIV/AIDS this year, plus 185 family members or partners of those infected. HOIP clients served rose 5.5% to 3,788. Finally, the State's Housing Security Guarantee Program issued 588 security deposit loan certificates in SFY '02, up 26% from the prior year.❖

## New Hampshire Homelessness, 2002

Approaching the growing challenge of homeless in our state, it's important to bear some underlying economic factors in mind.

### New England pop. growth, SFY 2001

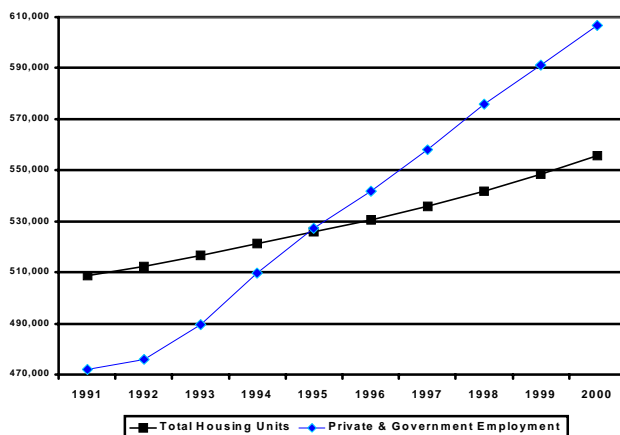


Source: U.S. Census Bureau

We continued to lead New England with a population growth of 1.56% from 2000 until 2001, nearly double the pace of runner-up Rhode Island. And despite the deepening nationwide recession exacerbated by the September 11<sup>th</sup> attacks, the U.S. Department of Labor reports that New Hampshire's total non-farm employment fell by less than one-hundredth of a percent in SFY '02, while its entire civilian labor force (employed and the un-

employed) grew 3.1%. At the same time, our statewide Median Family Income (MFI) rose 2.6% to \$58,800, remaining significantly ahead of the national MFI of \$54,400.

### NH employment vs. housing

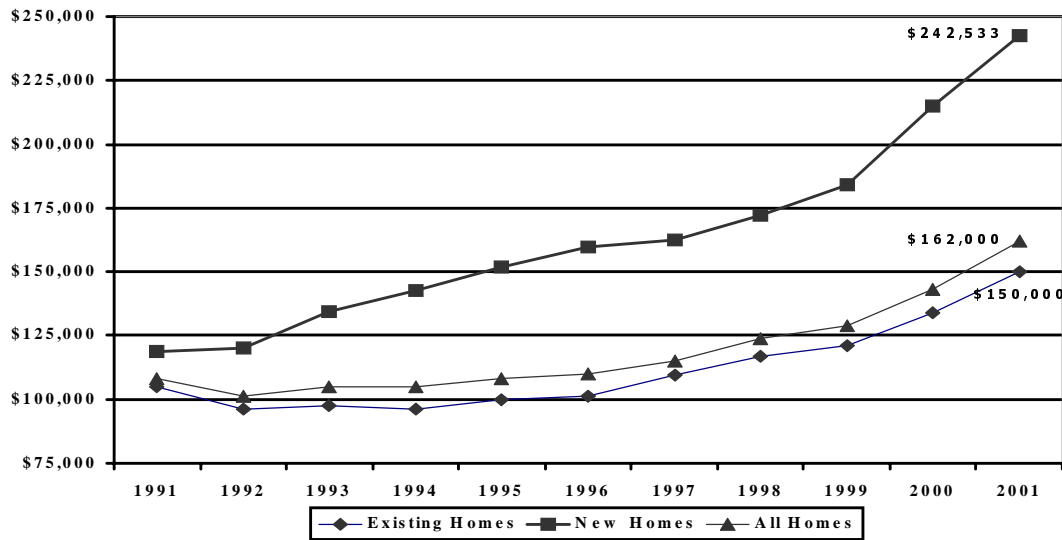


Source: NH Housing Finance Authority

However, construction of homes in our state — especially multi-family homes which tend to be more affordable — continues to lag

the tide of new residents. New Hampshire Housing Finance Authority (NHHFA) data indicate that through the last half of the 1990s, the rate of

## Median price of NH homes



Source: NH Housing Finance Authority

job growth dramatically exceeded the rate of housing production, with a conspicuous effect upon statewide home prices and rental costs. Halfway through SFY '02, the statewide real estate market was so strong that all current listings were turning over in approximately four months. In this “seller’s market,” New Hampshire’s home prices in SFY '02 jumped an average 10.87%, the fifth highest annual rate in the nation, according to the Office of Federal Housing Enterprise Oversight.

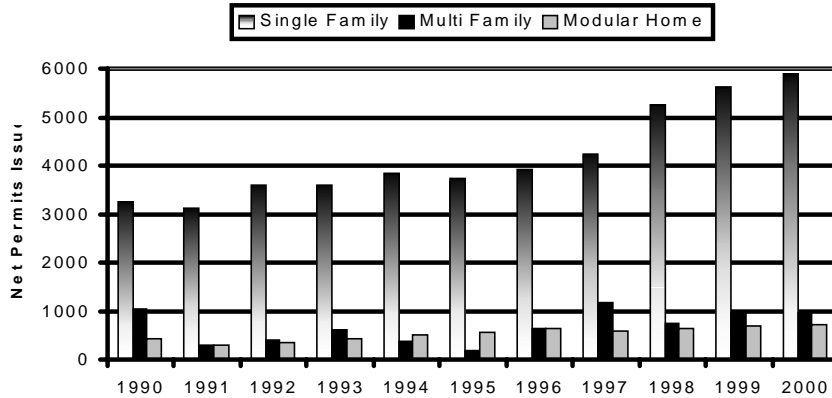
We are just not building enough housing, especially not enough housing that is affordable to the least wealthy segments of our community. Of the 59,370 permits for new housing issued in the state from 1990 through 2000 (the last year with available data), 88% were for single-family conventional or modular homes. In 2001, the last year with available data, new homes in New Hampshire had a median purchase price of \$242,533. Including sales of existing homes, the state’s 2001 median purchase price was \$162,000.

At such prices, renting in a multi-family environment remains the



only option for many New Hampshire families. Yet the Office of State Planning reports only 7,351 permits issued from 1990 through 2000 for

## NH housing permits issued



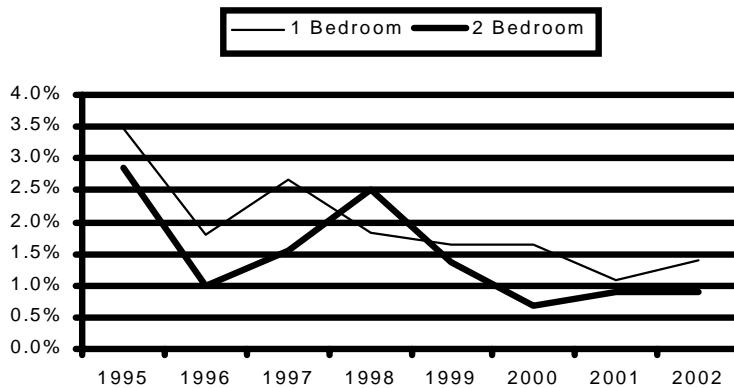
Source: NH Office of State Planning

new multi-family homes, only 12.4% of the single-family homes being built during the same period. Moreover, the number of multi-family permits issued has remained virtually unchanged over the past two reporting years, while

the number of single-family permits continues a five-year trend of growth.

For the third year in a row, not surprisingly, the NHHFA's statewide rental vacancy rate for two-bedroom apartments held at a statistically negligible rate of less than 1%

## NH rental vacancy rates



Source: NH Housing Finance Authority

equivalent to "no vacancy"). Such continued strong rental housing demand, according to the NHHFA, propelled an 8.1% jump in statewide gross rental costs to a median of \$884 a month for a two-bedroom unit in 2002. (The rise in median annual gross rent increase had

been 5.7% the year before, suggesting a rapid increase in demand.)

For a typical worker in our state, housing affordability has become a

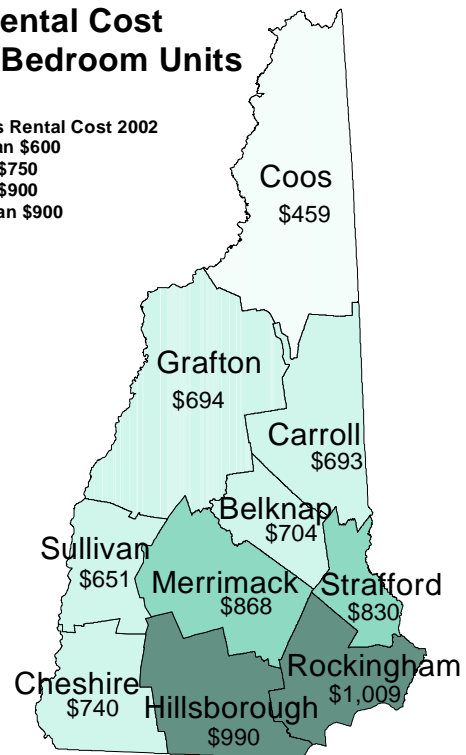
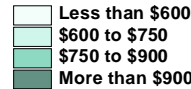
critical concern, if not an impossibility. According to the National Low Income Housing Coalition, a full-time worker living in New Hampshire would need to earn \$15.77 per hour in order to afford a two-bedroom unit at the state's 2002 Fair Market Rent rate of \$820. (Set by HUD, the U.S. Department of Housing and Urban Development, this rate typically lags market conditions such as those measured by the NHHFA's 2002 Residential Rental Cost Survey.)

Across the state in 2002, the NHHFA found monthly median two-bedroom gross rental costs ranging from \$1,009 in Rockingham County to \$459 in Coos County. In only five years, in fact, the NHHFA found that six of our 10 counties have shown rent increases of at least 25%, with Rockingham increasing by 37.5% and Hillsborough by 36.7%. Belknap, Grafton, Merrimack, and Strafford Counties also posted rent increases of at least 25% in that period.

For most of us blessed with steady jobs, careers, and good homes, the tragedy comes in understanding that a New Hampshire resident working full-time at the \$5.15 per hour minimum wage can afford monthly rent

## Gross Rental Cost for Two Bedroom Units

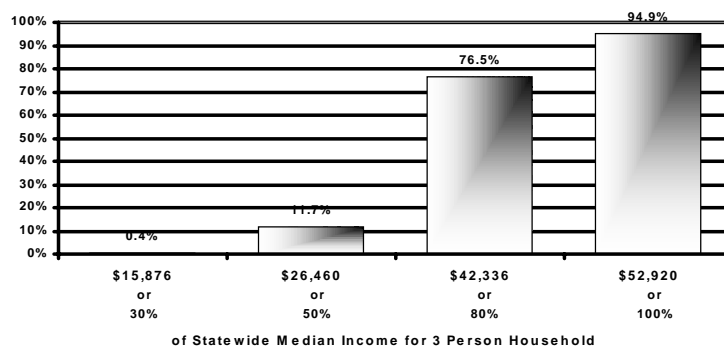
Median Gross Rental Cost 2002



NHHFA

## NH rental have's & have-not's

Percent of 2-Bedroom Units in  
2002 Rental Cost Survey  
Affordable at Selected Household Incomes

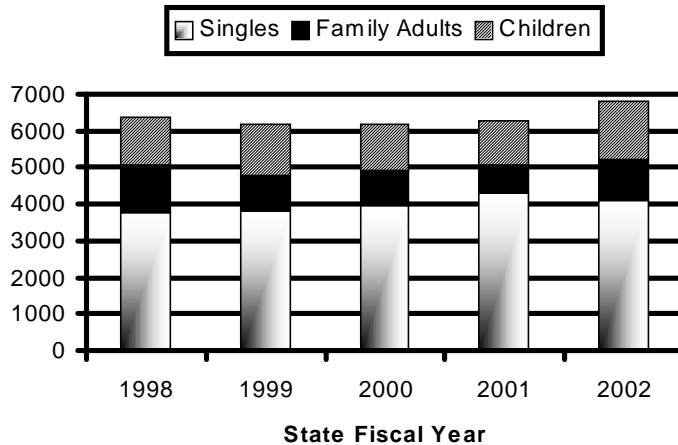


Source: NH Housing Finance Authority

of no more than \$268 (per HUD guidelines), and in realizing what this means in our rental marketplace today.

In 2002, the NHHFA found that less than *half of one percent* of the

## Total people sheltered



Source: NH Office of Homeless & Housing Services

State's two-bedroom apartments were affordable to those with extremely low incomes, defined for 2002 as \$15,876, or 30% of the HUD statewide Median Family Income adjusted for a three-person household. (Remember that the minimum wage equates to only \$10,712 per year, a third less than the "extremely low income" rate.)

At less than \$26,460, or 50%

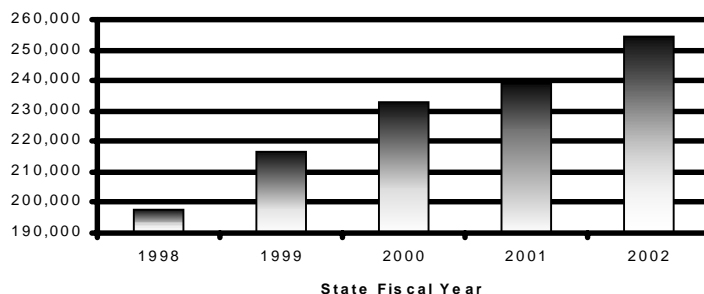
of the three-person statewide MFI, the "have-nots" in New Hampshire's 2002 rental housing market are effectively priced out: they may even be homeless unless they are doubling up with friends or relatives. And they

are virtually assured of becoming homeless in the event they are forced to seek different housing in the current New Hampshire market.

Given this grim economic backdrop, it's not surprising that the picture of homelessness in our state continued to worsen in SFY '02. While state-funded emergency and

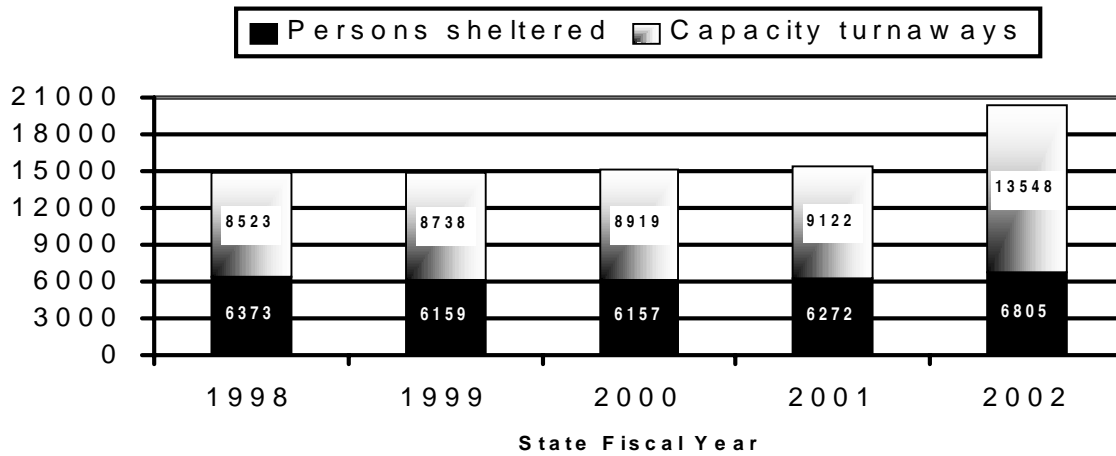
transitional shelter capacity posted a net growth of 186 beds over the year

## Shelter bednights provided



Source: NH Office of Homeless & Housing Services

## State-funded shelter need

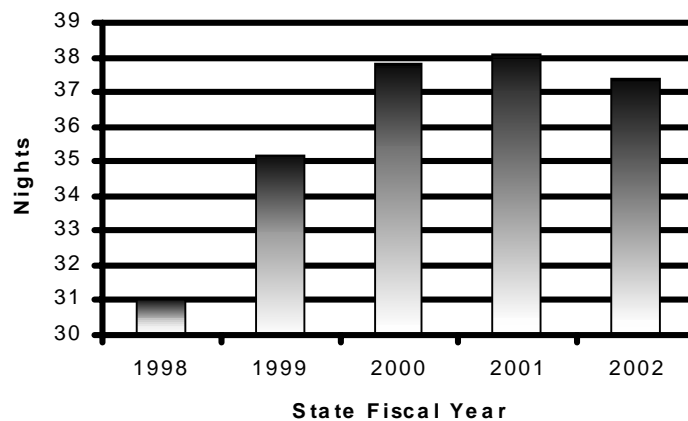


Source: NH Office of Homeless & Housing Services

prior, a third of those beds were from new winter emergency shelters which did not operate year-round.

Despite an extraordinarily mild winter, 6,805 persons were sheltered in SFY '02, up 8.5% over the prior year. These persons consumed 254,290 bednights of shelter (one person sheltered for one night), an increase of 6.4% from '01. More disturbingly, however, 13,548 homeless persons were turned away due to shelter capacity limits in '02, a jump of 48.5% indicating a dramatic increase in the need for temporary shelter.

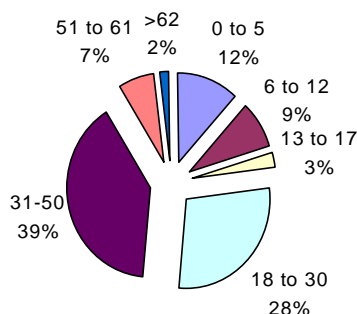
## Average length of stay



Source: NH Office of Homeless & Housing Services

The only positive statistic to emerge from the last state fiscal year's homelessness assistance activities was a 1.8% decline in average shelter

## Age of clients sheltered, SFY 2002



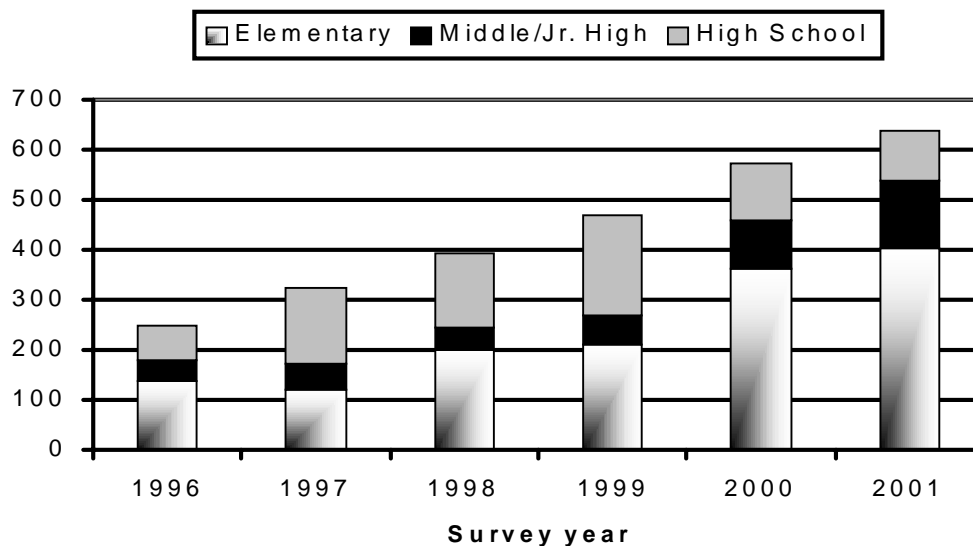
Source: NH Office of Homeless & Housing Services

stays to 37.4 days, which still contrasts sharply with the 14.3-day average recorded 10 years ago. Overall, the year's substantial increase in state-funded homeless shelter capacity was far exceeded by the increase in need for temporary shelter during a year with relatively mild winter temperatures and limited snowfall.

Demographically, the State-assisted homeless population in

SFY '02 continued to appear middle-aged or younger. Only one in 10 was

## Homeless NH school children

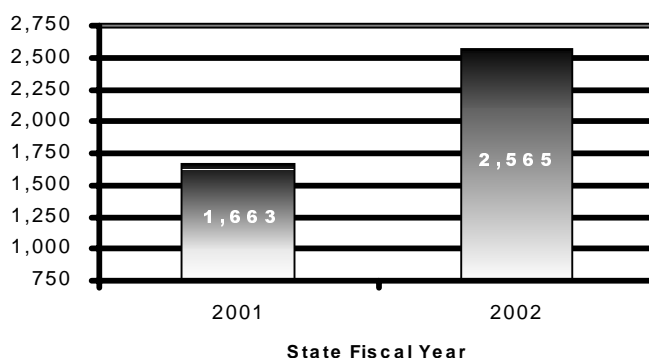


Source: NH Department of Education

older than 50. Two out of three were aged 18 through 50, and one in four was younger than 18. The State Department of Education continues to document an upward trend in the number of school children who identify themselves as homeless (and certainly not all do). While 2002 data are not yet available, the 2001 New Hampshire schools survey identified a 2.6% increase in homeless students from the previous year.

Records maintained by the state-funded New Hampshire Homeless Hotline confirm that 2,565 homeless clients were served in SFY '02, a 54.2% increase from the 1,663 homeless clients served

### Clients served by NH Homeless Hotline



Source: NH Homeless Hotline

in SFY '01. Homeless Hotline data also provide valuable insight into the evolving reasons why people are homeless in New Hampshire. (See chart on next page.) In descending order, the top five reasons indicated by homeless callers in SFY '02 were: eviction; previously living with others; unaffordable housing; domestic violence; and lack of a job. A year earlier, the top five reasons had been: domestic violence; eviction; previously living with others; unaffordable housing; and mental health. The rankings shift suggests that statewide economic factors contributed more noticeably to homelessness than they did in SFY '01.

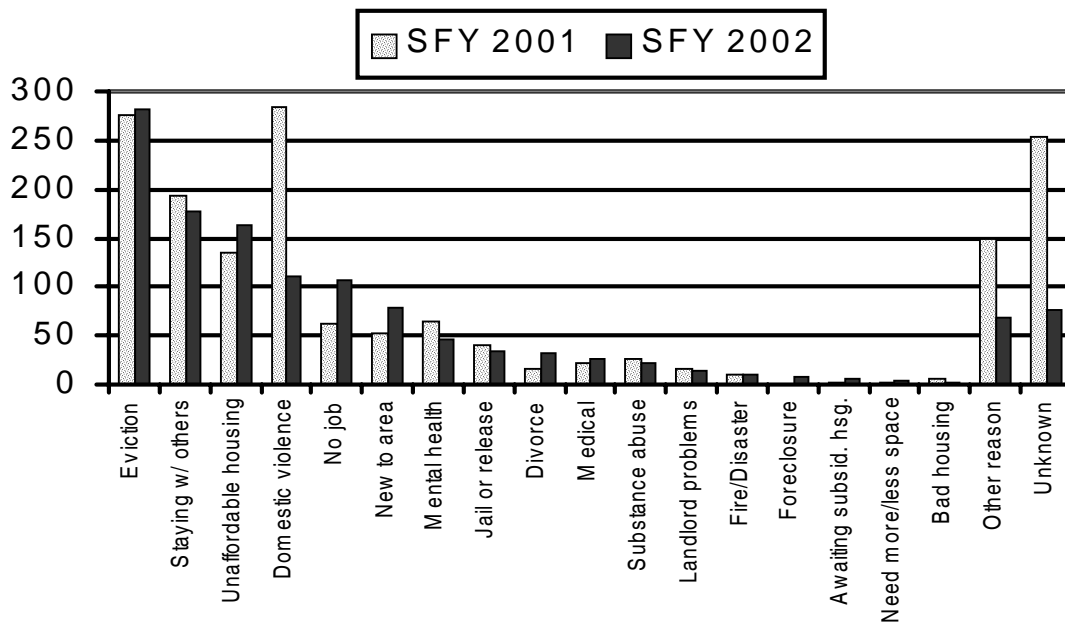
With the horrific national and international events during SFY '02, it's not hard to overlook the plight of 701 homeless persons here in our state. Such a number can't — and shouldn't — overshadow the thousands who lost their lives in the World Trade Center, the Pentagon, or on four hijacked airliners. But on any night in SFY '02, 701 New Hampshire residents — on average — found themselves homeless and received temporary

shelter within the State-funded emergency shelter provider system. Many others also were homeless each night but were too late to find a bed, or even warm space on a floor. In order not to forget these members of our community, the challenge rises before the citizens of our state and its Continuums of Care: how to encourage and support New Hampshire's dedicated but overwhelmed provider network with resources which will assist the growing numbers of homeless in our community in a substantive, conclusive way? As this annual report provides you with insight into state-funded homeless shelter activities, please remember that New Hampshire's homeless assistance providers — whether publicly or privately funded — would welcome your thoughts, your effort, and your support.

*Lance E. dePlante*

Director, Office of Homeless & Housing Services

## Reasons for NH homelessness



Source: NH Homeless Hotline

# Program Funding

State of New Hampshire Division of Behavioral Health Office of Homeless and Housing Services							
State of New Hampshire			Federal Center for Mental Health Services		U.S. Department of Housing & Urban Development		
ESG	HSGP	RGP	PATH	ESG	HOIP	SHP	HOPWA
Emergency Shelter <ul style="list-style-type: none"><li>• Emergency</li><li>• Transitional</li><li>• Prevention / Intervention</li><li>• Specialty Programs</li></ul>	(Non-cash voucher program) <b>Security Deposit Loan Vouchers</b>  Loans: 1,690	(Grant program) <b>Rental Guarantee Program</b>  Grants: 39	(Non-Housing) <b>Projects for Assistance in Transition from Homelessness</b>	(McKinney) <b>Emergency Shelter</b> <ul style="list-style-type: none"><li>• Emergency</li><li>• Transitional</li><li>• Prevention / Intervention</li></ul> Capacity: (see NH ESG)	(Non-Housing) <b>Outreach / Intervention for Unsheltered Homeless</b>	TH / PHH (CoC) <b>Homeless Housing Supportive Services</b>  Capacity: See narrative.	<b>Housing Opportunities for Persons with AIDS</b>  Providers: 4 Term: varied \$1,372,948
Bed Capacity: 793 Providers: 32 SFY: 7/1-6/30 \$2,227,384	Providers: 9 SFY: 7/1-6/30 \$2,000,000	Providers: 9 SFY: 7/1-6/30 \$1,000,000	Providers: 8 FFY: 10/1-9/30 \$300,000	Providers: 13 CY: 1/1-12/31 \$434,000	Providers: 5 SFY: 7/1-6/30 \$395,003	Providers: 16 Term: varied \$4,347,186	
<b>NOTES:</b> <ul style="list-style-type: none"><li>- All Federal money has match / share requirements that vary from program to program.</li><li>- State match is one to one.</li><li>- CoC: Continuum of Care</li><li>- CY: Calendar Year</li><li>- ESG: Emergency Shelter Grant</li><li>- FFY: Federal Fiscal Year</li><li>- HOIP: Homeless Outreach Intervention Project</li><li>- HOPWA: Housing Opportunities for Persons With AIDS</li><li>- HSGP: Housing Security Guarantee Program</li><li>- PATH: Projects for Assistance in Transition from Homelessness</li><li>- PHH: Permanent Housing for Homeless Handicapped</li><li>- RGP: Rental Guarantee Program</li><li>- SFY: State Fiscal Year</li><li>- SHP: Supportive Housing Program</li><li>- TH: Transitional Housing for Homeless</li></ul>							



## I. Homeless Shelter Services

The State of New Hampshire, Division of Behavioral Health, provided funding to 22 homeless/temporary housing shelter providers in SFY '02. With input from the Emergency Shelter and Homeless Coordination Commission, shelter services were funded in the following categories:

PROGRAM TYPE	NO. OF SHELTERS
Domestic Violence Shelters	11
Emergency Shelters	13
Transitional Shelters	11
Specialty Shelters	4
Winter Emergency Shelters (WES)	2
<b>TOTAL</b>	<b>41</b>

In SFY '02, these state-funded homeless shelter providers gave temporary housing to 6,805 persons, up 8.5% from SFY '01. Of those sheltered, 4,124 were single adults, 1,068 were adults in families with 1,613 children, and 48 adults were in families without children. A reported 931



*The last home of Bernard Michael Phelan, 44, who died alone of liver failure in the cab of this abandoned truck in Portsmouth in 1996. (Photo by Justine Shea)*

persons sheltered had a diagnosed mental illness, 1,811 experienced substance abuse (chemical or alcohol) problems, 453 were dual-diagnosed with mental illness and substance abuse, 743 were victims of domestic violence, and 428 were veterans. The number of bednights (*i.e.*, one person sheltered one night) provided rose 6.4% to 254,290, and the average length of stay decreased from

38.1 days to 37.4 days in SFY '02. (See charts on pages 9 and 10.) The table on the next page summarizes the recent trend of demand for state-funded emergency shelter services.

	SFY '98	SFY '99	SFY '00	SFY '01	SFY '02
Total persons sheltered:	6,373	6,159	6,157	6,272	6,805
Total bednights provided:	197,525	216,622	232,771	238,892	254,290
Average length of stay:	31 days	35 days	37.8 days	38.1 days	37.4 days
Shelter capacity turnaways:	8,523	8,738	8,919†	9,122†	13,548

† Believed significantly underreported. See Emergency Shelters narrative (Section I-B) for details.

Shelters receive state funding to promote part of a local Continuum of Care. The Continuum of Care is established to provide efficient access to critical community-based services such as employment, medical, educational, mental health and substance abuse counseling, housing and other services that facilitate an individual or family's ability to attain and maintain a stable living environment. ❖

## A. Domestic Violence Shelters

Through a contract with the New Hampshire Coalition Against Domestic and Sexual Violence, the State of New Hampshire, Division of Behavioral Health, provided funding to 11 Domestic Violence Shelters in SFY '02. Homeless victims of domestic violence, predominately women and children, receive emergency and transitional shelter and critical support services through these shelters.

The State-supported Domestic Violence Programs also provide food, clothing, linkages with mainstream services as appropriate, and a safe and confidential environment for victims of domestic violence.

A list of **Domestic Violence Shelters** funded by the State of New Hampshire is provided in Appendix C. ❖



'This is a woman who has a baby and has NO home!' by 8-year-old Gabby. Recipient of the North American Street Newspaper Association Art Award. (Courtesy of Under The Bridge Street News NH.)

## **B. Emergency Shelters**

The State of New Hampshire, Division of Behavioral Health, provided funding to 11 providers for 13 emergency shelters in SFY '02. These shelters provide safe, temporary living accommodations for homeless men, women, and families, and saw a net increase of 23.5% in bed capacity over the year, of which about one-third (60 beds) were in two new winter emergency shelters which did not operate year-round. The number of people receiving temporary housing (emergency or transitional) from these shelters in the past year increased 8.5% to 6,805 compared to 6,272 persons in SFY '01. And these shelters reported a 6.4% rise in the number of bednights provided (*i.e.*, one person sheltered for one night) in SFY '02 to 254,290. In a positive change, the average length of a temporary (emergency or transitional) shelter stay declined 1.8% to 37.4 days.

State-funded shelters reported 13,548 turnaways due to full capacity in SFY '02, up nearly 49% from prior year levels. This statistic means that many more people are turned away due to capacity limits than are sheltered. In the past this number has been, in our judgment, understated. We believe that a jump of this magnitude in '02 reflects increased emphasis on turn-away records-keeping in the state-funded emergency shelter community, as well as an increase in the homeless population. Rather than turn desperate individuals and families away, many shelter providers adopt improvised sleeping arrangements and operate consistently above funded capacity. Nine state-funded shelter providers operated year round at an *average* of 100% or more of official capacity in SFY '02, while five more continuously averaged between 90% and 99% of official capacity. One state-funded shelter averaged 157% of official capacity, *year-round*. Based on capacity reports, the OHHS calculates that on peak nights in SFY '02, approximately 1,000 homeless persons were sheltered only within the state-funded shelter system.

The number of homeless individuals seeking first-time assistance from

the State-funded emergency and transitional shelter providers rose nominally in the past year to 1,967. This statistic suggests that homelessness in New Hampshire is not confined to a chronically homeless core group, but continues to spread into new segments of the State's population.

To facilitate the transition from homelessness to permanent housing, case management services provided to emergency shelter clients feature important linkages with mainstream programs including: health, employment, mental health, substance abuse referrals, food, and clothing. Shelters serving families provide service linkages with other family-service providers including child care, education, immunization, wellness programs, and family counseling.

**Emergency Shelters** funded by the State of New Hampshire are listed in Appendix C.❖

*'I, like probably half the world, come from a very dysfunctional family. I have a bitter emotionally abusive mother and a bitter physically abusive father, a vicious cycle I chose to break with my own child.*

*Though I have traveled the world I am from New Hampshire. I started running away from home at 11 years old. Being cold and hungry was far better option then being called names or beat up. When I was 12 I met an older guy (19) who 'took me under his wing' and taught me things I would never want my 12-year-old to know, but that's survival on the streets. I pray my daughter never feels she has to sell drugs, beg or steal because of something I have said or done.*

*At 14 I managed to get a fake I.D. and hitchhiked to New York City through truckers and became a stripper. A year later I came home and tried to make peace with the family I barely spoke to for three years. Finding there was no peace to be made, I hit the streets again within days and met my daughter's father. He was a 20-year-old alcoholic and I was a 15-year-old 'street kid' so I'm sure you can imagine the future in store for us. He was physically abusive but that was nothing I wasn't used to and at 17, I gave birth to our daughter, Michelle. When I had Michelle I thought things might change between me and my family or me and her dad. They did...for the worse.*

*Naturally, being a single teenage mother with no family support wasn't an easy task. I went back to selling drugs, stripping and bouncing state to state, knowing the whole time that this wasn't the fate I wanted for Michelle, but how do you give up the freedom of the streets, the only people who understand you and the things you do and a pocketful of money that ensures you and your child will have everything you need or want? You just do. You meet someone like Cindy [Wright], who always has a smile on her face when you walk though her door, who is happy to hear your voice on the other line and most importantly, is non-judgmental.*

*Being on a set income is not the life I dreamed of but the streets is not the life I dream of for my daughter and it is so nice to come home every night and wake up clean every morning and that is why I think the New Start Program is good for me.'*

*-- "Karen," a client of New Start Community Action Program*



*Someone's home behind a Portsmouth-area medical building. (Photo by Justine Shea)*

### **C. Transitional Shelters**

Transitional Shelters provide a safe and stable housing environment complemented by comprehensive case management services to facilitate a permanent step away from homelessness. Referrals from emergency shelter staff flow individuals into transitional programs whenever a judgment can be made that the individual or family is prepared to move along the Continuum of Care to permanent housing. Community-based referral services also enable direct entry to transitional housing.

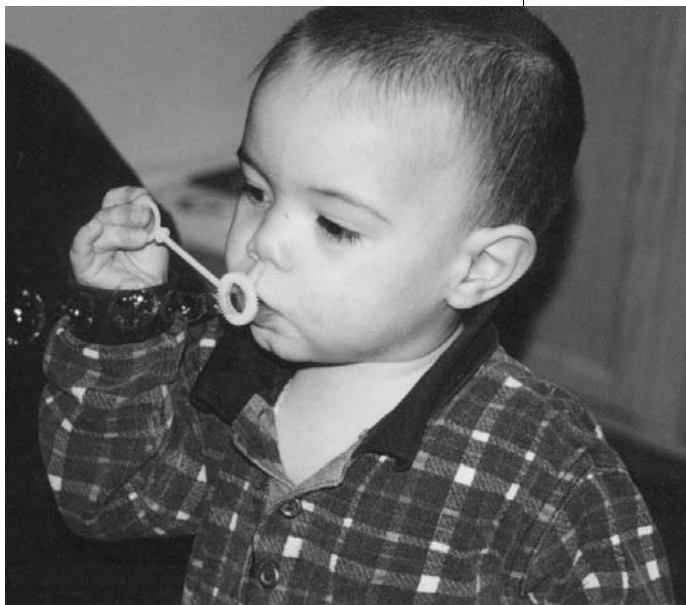
Eleven transitional shelters, administered by nine providers, received funding from the State of New Hampshire, Division of Behavioral Health in SFY '02. State-funded **Transitional Shelter** providers are listed in Appendix C.❖

## **D. Specialty Shelters**

Special needs such as youthfulness, teen pregnancy, or substance abuse often make it difficult for some individuals to receive proper assistance in mainstream emergency shelters. Staffed by persons trained in the special needs of persons they serve, Specialty Shelter programs play an important role in the State of New Hampshire Continuum of Care.

The State of New Hampshire, Division of Behavioral Health, provided statewide funding to three Specialty Shelter programs in SFY '02. Without the Specialty Shelter programs, highly vulnerable homeless with special characteristics or health conditions might remain unrecognized and inappropriately assisted in the shelter service system.

**Specialty Shelters** funded by the State of New Hampshire are listed in Appendix C.❖



*Evan, pictured here attending the Children's Program at Families in Transition, came into the program at three months old with his mother. They have recently completed the program at Families in Transition and have moved into permanent housing. Evan's mother is currently employed and the family is doing well. (Raysa Ortega photo used with the mother's permission.)*

'I see advertisements on the TV. "Do you worry all day, every day? If this anxiety has lasted six months or more you could have a chemical imbalance."

I worry every day about becoming homeless. I have an economic imbalance. I have given up buying "luxury" items with this last rent increase. No more clothes, kid's toys, or non-food items. I use all of our income for rent. I get fuel assistance. I pinch our pennies. We have one TV, one radio, and one toaster. We have no microwave, car, or any other fine thing that I didn't already sell. I use food pantries. I walk everywhere. I wash clothes out by hand. I worry every day that the kids will make too much noise, that a neighbor will complain. I try to keep them quiet but they're kids.

I don't complain about the lack of hall lights, the broken windows or the dripping faucet. I don't want to remind him I am here and he could raise the rent again. I worry every day. Too many people I know are already out there, I couldn't do it. I wouldn't survive it again. It wouldn't be the same as going to the woman's shelter. I wouldn't be finding freedom, I am still a prisoner of war. In this war on poverty, we aren't winning. I don't think Paxil will cure it.'

— C. Duffin, in *Under The Bridge Street News NH*

## II. Homeless Prevention/Intervention Services

Homeless Prevention / Intervention services are widely varied and thus difficult to quantify uniformly. They range from providing budget counseling and/or referral to appropriate homeless intervention providers, to making payments for back rent in the face of eviction, past-due electrical bills where disconnection is imminent, or fuel assistance, rental security deposit loans, or limited rent guarantees. The majority who apply for prevention services do so as a final attempt to maintain their current living or employment situation. Surveys show that many persons applying for such Homeless Prevention/Intervention services did so based upon a sudden and unexpected loss of income, with high medical bills frequently cited as a contributing factor.

The State of New Hampshire, Division of Behavioral Health, administers the HUD-funded Homeless Outreach and Intervention Program (HOIP). More generally during SFY '02, the State provided Prevention/Intervention services to persons at imminent risk of homelessness. These important services result in interventions that prevent the occurrence of homelessness. Services were funded through seven Community Action Agencies or CAPs, and seven other non-profit service providers.

The Housing Opportunities for Persons with AIDS (HOPWA) program provided housing assistance and support services for low-income persons with HIV/AIDS and their families. Using HUD funding, the State administered two HOPWA projects last year under the sponsorship



*Anthony, aged 2, was placed in his homeless father's sole custody due to his mother's illness. A joint effort by the DHHS, Concord City Welfare, Community Bridges, and others was able to arrange transitional housing with supportive services so that the family could remain together. Day care arranged for Anthony enabled his father to resume his work as a mechanic. (Photo by Marcella Hinkell used with the father's permission.)*



of the Merrimack Valley Assistance Program (MVAP). One provided HOPWA services to all of the State except Hillsborough County, with case management services provided by MVAP, AIDS Community Resource Network, AIDS Services for the Monadnock Region, and AIDS Response Seacoast. Technical assistance to the project was provided by the Harbor Homes affiliate Welcoming Light. The second HOPWA project, serving Manchester, Bedford, Goffstown, and Weare, is sponsored by MVAP with supportive services provided by their Manchester office. In the last reporting year these two projects provided housing assistance to 76 individuals infected with HIV/AIDS and an additional 45 family members. The programs also provided supportive services only to another 215 persons infected with HIV/AIDS as well as an additional 140 family members. In SFY '02 HUD provided the Balance of State HOPWA grant a one-year extension to March 2003, and the OHHS and MVAP applied for a three-year grant renewal.

The State of New Hampshire Housing Security Guarantee Program issued 588 security loan certificates in SFY '02, up 26% from the year prior. This program provides security deposit loans for households who meet the HUD "very low income" criteria, or 50% of MFI. (In New Hampshire for 2002, the HUD-adjusted MFI very low-income threshold

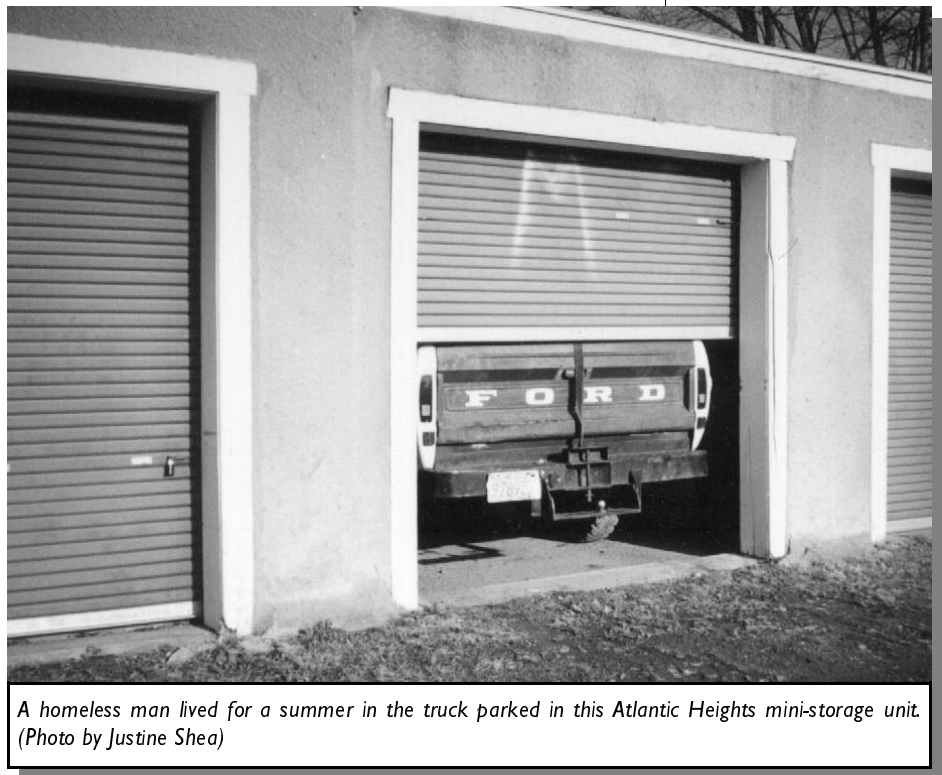
for a three-person household is \$26,460.) The program has assisted 2,844 households since inception in 1993. An important aspect of this program is a flexible loan-payment schedule designed to fit realistic budget parameters. A



*Justine Shea photo*

detailed discussion of the HSGP may be found in Chapter IV, *Activities of the Office of Homeless and Housing Services*.

The efforts of homeless service providers who employ creative intervention strategies result in the prevention of thousands of individuals and families from experiencing the devastating effect of homelessness. Continuation of a strong homeless prevention strategy is an important component in the evolving Continuum of Care designed to break the cycle of homelessness.❖



*A homeless man lived for a summer in the truck parked in this Atlantic Heights mini-storage unit.  
(Photo by Justine Shea)*

## **A. Community Action Agencies**

The New Hampshire Community Action Agencies (CAAs) serve

every city and town in the State and administer a range of programs to assist persons in need, including those at risk of homelessness. Their advisory councils, boards of directors and staff implement programs tailored to local needs. Additionally, these service providers coordinate mainstream services for the population they serve, making CAAs a natural point of entry into the homeless service system.

The State of New Hampshire, Division of Behavioral Health, funded homeless intervention activities specific to the prevention of homelessness in six CAAs in SFY '02.

**Community Action Agencies** receiving state homeless and housing funds are listed in Appendix C.❖

## **B. Other Intervention/Prevention Providers**

Certain other Homeless Prevention/Intervention providers are experienced both in the prevention of homelessness and strategically located to provide services in high-risk areas of the State. They provide services directly or by referral to an alternative mainstream service provider.

The State of New Hampshire, Division of Behavioral Health, funded 15 **Other Intervention/Prevention Providers** in SFY '02, listed in Appendix C.❖

**If I Were You**

**PITY!**

*I don't want your damn pity!  
Life is hard enough  
in this cold dark city.*

*Sure, I may be homeless  
and you might not like the way I look,  
but that doesn't make me  
a crack head or crook.*

*What I really want  
is for you to accept -  
that I'm a fellow human being  
who deserves some respect.*

*I'm here for reasons  
you may never understand,  
but please don't think me subhuman  
as I walk this barren land.*

*You who sit in your nice warm house  
and drive around in fancy cars,  
should know about the cold, hard  
truth  
that made us who we are.*

*Women who are beaten  
and couldn't take it anymore,  
men having a hard time  
'cause they fought a war.*

*Some who have fallen  
right between the cracks,  
who could use a little help  
but the services they lack.*

*Take a good look in the mirror  
the next time that you do,  
think about what it would be like  
If I were to become you!*

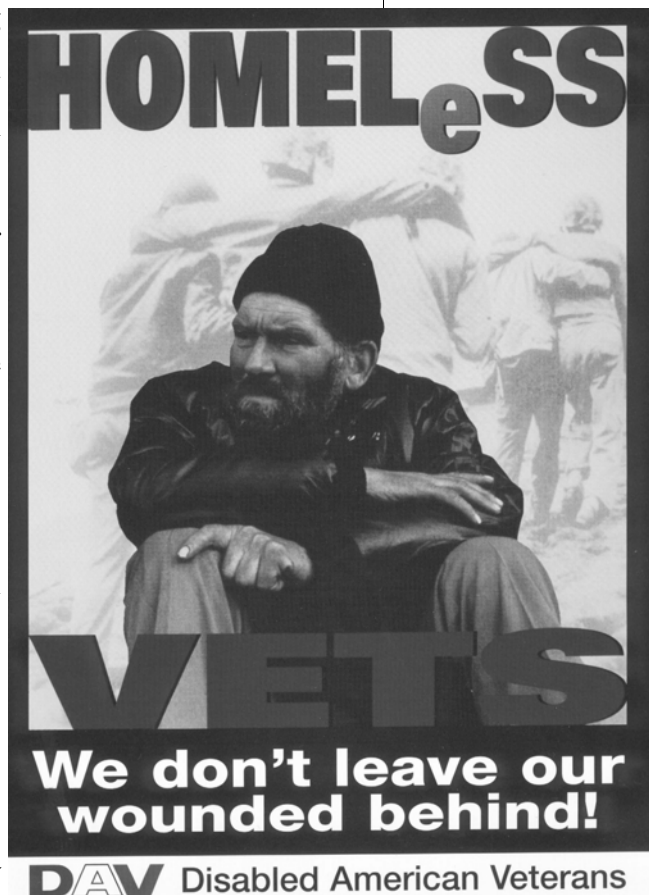
— 'C,' from *Under The Bridge*

### **C. Homeless Outreach/Intervention Program**

Although homelessness is often regarded as a uniquely urban problem, contacts with unsheltered homeless individuals have occurred in the majority of New Hampshire's cities and towns during the past two years. The objective of the Homeless Outreach/Intervention Program is to link the unsheltered homeless population with emergency shelter and other appropriate resources within the State's three Continuums of Care.

The HUD-funded Homeless Outreach and Intervention Program (HOIP) is a statewide network of nine outreach specialists who seek to identify and engage New Hampshire's unsheltered homeless. In the past year, homeless clients served by HOIP workers in the Balance of State (*i. e.*, excluding Manchester and Nashua) rose only 5.5% to 3,788 persons, the slackened rate of growth perhaps reflecting some progress in engaging a segment of the homeless population that is not always served by the emergency shelter system. (The reporting of Manchester and Nashua contacts under HOIP is not consolidated through the DHHS.)

HOIP unsheltered homeless contacts are followed up systematically to ensure that appropriate service is provided. First, there is assessment of immediacy of need and appropriate intervention based upon weather, physical condition, mental/emotional/behavioral status, substance abuse, and willingness to accept assistance. Then, transport is arranged to the appropriate resource (*e.g.*, emergency room, detox facility, shelter) as needed. In the case of a psychiatric crisis, transport is arranged to the nearest mental health crisis unit. ❖



## The Socks

*I entered the laundromat with my clothes and as I set them on the blue-flecked counter, I noticed the smell. It was an odd combination: tangy, tart and medicinal. I thought I smelled tea tree oil, too.*

*I went back out to the car to get the other basket, and as I came in, I saw him. He was sitting over against the window in an old patio furniture chair. He had his feet sitting on a dark maroon towel and he was dumping hydrogen peroxide, rubbing alcohol, and tea tree oil on his legs. His legs were covered with sores. His feet were swollen. The peroxide bubbled endlessly on the open wounds and the liquid running down his legs was bloody and yellow at the same time.*

*I watched as two perky blonde women entered through the door. They were carrying a fancy comforter and they were quite tan.*

*"Isn't that a dryer?" one of them said.*

*"No, it's a washer," the other replied, "I think."*

*They fluffed their hair, checked their platinum cell phones, and twirled a little on their strappy sandals.*

*"Oh gross," one of them said, as she spotted the guy with the sores.*

*"I'm homeless," he said without looking up. "I do a lot of walking. I'm trying to take care of my feet, but it's just really hard because they never have a chance to get better."*

*Perky blonde didn't respond. She looked at her friend, rolled her eyes, stuck her finger down her throat (in a fantastic gag-me Valley Girl impression) and walked out. I eyed the homeless man. He reminded me of my uncle; uncontrollable reddish beard, hardened attitude, independent.*

*I thought of my mother and her own homelessness. I thought of the mercy that had been shown towards me. I started my laundry, ran out to my*

*(Continued on page 28)*



Photo by Marcella Hinkell

*(Continued from page 27)*

car, and went to a nearby shoe store. I found two packs of the softest, thickest socks I could find, bought them, and ran them back to the homeless guy. He didn't say anything, and neither did I. All I could think about, however, was that I missed my mother, that I have always missed my mother, and that I hoped somebody would show love and mercy on her.

My own troubles with motherhood lately have forced me to think about this woman who gave birth to me, this woman who has never really been a part of my life, but who, when I close my eyes and am still, I can sometimes feel. Partial images, sensory experiences of sitting in her lap, of rocks and water and tide pools; of being loved and safe and protected — sometimes they are there, sometimes I remember.

I think of how she too sat in a courtroom. I think of how she didn't have a supportive husband or friends or a therapist — I think of how alone she was; how she must have felt when I was taken away. I think of how it must have torn her apart to leave me with him; I think of what it must have taken for her to walk away, like Lot's wife, no pillar of salt, no tears, no looking back.

I wish I could find her, for just a moment. I wish I could tell her how much I love her, how much I've always loved her. I wish I could tell her that I hated her because I never understood, but now it makes sense -- imperfection and humanity and being abused and being afraid and letting go and holding on and how in the end it is all about being real, being human, and how lucky you are (or aren't) to have the love and care of others who will hold your hand and walk you out of the shadows and towards the light.

And so, when I gave those socks to that homeless man in the laundromat, I wasn't giving them to him, really. I was giving them to my mother, to my uncle, to the people in my family who have struggled with their addictions and their imperfections, and who have been alone in that struggle. I was hoping that somehow, through these thousands of miles, my mother would know that the daughter she never knew had seen a glimpse of her own frailty and brokenness and through that glimpse, had forgiven her mother for everything that had ever hurt her. And had forgiven her for not being there when she needed her.

-- Anneli Altson

Anneli Altson lives in California. Her mother, Anneli Dyer, died homeless in Manchester two years ago. The author, who had been searching for news of her mother, wrote this piece in 2001 before learning of her mother's death via a web-page posted by *Under The Bridge Street News NH*, with whose permission this article has been reprinted.



Photo by Justine Shea

### III. Special Needs Programs

In SFY '02, the State of New Hampshire provided funding to 29 statewide special needs programs. These programs emphasize intensive and comprehensive case management services and are designed to assist the particular needs of chronically homeless persons suffering from serious mental illness, dual diagnosis, Acquired Brain Disorder, and other disabling conditions.

Providers include Community Action Agencies, Community Mental Health Centers, New Hampshire Hospital, and several smaller non-profit organizations. Delivered services included outreach, intervention, housing, and supportive services to hard-to-engage homeless and/or homeless with disabilities.

Special needs services were provided in the following categories:

Program Type	Number of Programs
HUD - Homeless Outreach/Intervention	5
HUD - Permanent Housing for Homeless Handicapped	9
HHS - Projects for Assistance in Transition from Homelessness (PATH)	8
HUD - Transitional Housing for Homeless	7
<i>Total</i>	29

Also funded by HUD, the Supportive Housing Program provides transitional/permanent housing and supportive services for 93 persons and transitional housing and supportive services for 32 persons with disabilities. This program is detailed in Section B of this chapter. The US Department of Health and Human Services (HHS) funded Projects for Assistance in Transition from Homelessness (PATH) for homeless intervention and supportive services to 747 persons in FFY 2001 (data for the federal fiscal year ending September 30, 2002, were still pending at press time). This program is detailed in Section C of this chapter. Both transitional and permanent housing for the homeless handicapped include extensive supportive services.❖

## **A. Permanent Housing for the Homeless Handicapped**

Permanent Housing providers to the handicapped homeless population offer a variety of housing and supportive services to persons with serious mental illness, or elderly persons with serious mental illness, dual diagnosis, or Acquired Brain Disorder. These programs, which include group homes and condominiums, were established in conjunction with HUD and are subject to renewal. The nine state-supported Permanent Housing programs in SFY '02 furnished housing and supportive services to 93 persons, an 8% increase from the year prior. These collaborative programs are:

- **Beaver Lake Lodge** in Salem, a 15-bed Community Residence for homeless elderly who are mentally ill;
- **Franklin Falls Farm** in Franklin, a six-bedroom farmhouse serving seven homeless persons with severe brain injuries;
- **Harbor Homes**, with various operating locations, providing a variety of housing and employment opportunities for homeless persons with serious mental illness in Southern New Hampshire;
- **McGrath Street** in Laconia, an eight-bed community residence with four attached apartments for mentally ill homeless persons;
- **Tide View Estates**, located in Dover, three two-bedroom condominiums providing permanent housing for homeless mentally ill adults;
- **Springbrook** in Portsmouth, three two-bedroom condominiums housing homeless persons with a serious mental illness;
- **Gemini House** in Manchester, a 15-bed residence housing homeless mentally ill persons with a concurrent substance abuse disorder;

**'Sometimes I remember what it was like being homeless. I still feel it when I go camping. It's the kind of feeling you get when you live with your parents. It doesn't feel right at all. I fear being homeless because people fear what they hated most....'**

**— Nic Chabot, New Start Community Action Program**



- **Rochester Homeless Housing Initiative**, a five-unit apartment building in Rochester, with supportive services, which houses homeless single adults with mental illness;
- **Permanent Housing Program—Concord** (pending in SFY '02), an 18-bed condominium, with supportive services, which will house homeless single women with disabilities, with and without children.

Handicapped homeless persons living in supportive housing benefit from convenient and assured access to health, mental health, and social support services offered by the programs or within the Continuum of Care and facilitated by these programs. **Permanent Housing for the Homeless Handicapped** providers funded by the State of New Hampshire are listed in Appendix C.❖

## ***B. Transitional Housing for the Homeless***

Like their Permanent Housing provider counterparts, providers of transitional housing offer a variety of housing and supportive services to homeless persons, some with a variety of disabilities including serious mental illness, or elderly persons with serious mental illness, dual diagnosis, or Acquired Brain Disorder. In SFY '02, the seven state-supported transitional housing providers furnished housing and supportive services to approximately 504 persons, an estimate based on capacity. These programs include:

- **Friendship House** in Bethlehem, a 30-bed transitional housing program with supportive services that houses approximately 200 individuals a year;
- **Gilpin House** in Littleton, a six-bed transitional residence serving homeless persons with severe and persistent mental illness and persons dually diagnosed with mental illness, substance abuse, and/or a developmental disability;

- **Pine Place Transitional Apartments** in Lebanon, which provides five transitional housing apartments and specialized 24-hour mental health treatment and support services to assist mentally ill adults;
- **Our Place Transitional Housing**, in Dover, a six-apartment shelter (containing 16 beds) sponsored by My Friend's Place, providing housing and supportive services to homeless families;
- **New Hampshire Hospital**, which administered a 43-bed HUD-funded program providing residential and rehabilitation services to homeless persons with serious mental illness;
- **The Family Transitional Housing Program** in Rochester, which operates 12 two-bedroom townhouses with half-day staff support to homeless persons with a mental illness.
- **NEXT STEPS**, in Keene, sponsored by Southwestern Community Services, the Keene Housing Authority and the City of Keene Human Services Department. This is a new five-unit transitional housing program with supportive services that will house and assist a minimum of 16 individuals, including those with disabilities, per year.

*'Just to fill out applications for an apartment costs money. Some places charge \$30.00 for an application fee and it is quite ridiculous if you ask me.'*  
— Pamela, from *Under The Bridge*

- **The Sullivan County Transitional Housing Project**, to open in Claremont in 2002, is sponsored by Southwestern Community Services. The project will provide transitional housing with supportive services to 40 people at one time, including homeless families and single women with disabilities or who are victims of domestic violence.

Addresses and contact information for these providers of **Transitional Housing for the Homeless** may be found in Appendix C.❖

### **C. Projects for Assistance in Transition from Homelessness (PATH)**

Designed to assist homeless persons with serious mental illness or dual-diagnosis, HHS-funded PATH services include outreach, case management, housing services, treatment and various interventions. Data from FFY '02, which ended September 30th, were still pending at press time in October. In FFY '01 the State supported the outreach of PATH ser-



*Bill Guinther photo*

vices to 747 homeless persons with serious mental illness or dual-diagnosis through eight PATH service providers, a nominal increase from the year prior. Of this subpopulation, 564 clients were enrolled with PATH providers in FFY '01.

Except in the northern three counties, regional community mental

health centers are primary providers of PATH services in the State. In the counties of Coos, Carroll, and Grafton, PATH funding is contracted through Tri-County Community Action Program in partnership with Northern New Hampshire Mental Health and Developmental Services, the designated provider of mental health and substance abuse services.

Collaboration between regional community mental health centers, homeless service providers, Community Action Agencies and the Division of Behavioral Health has facilitated a dynamic framework of service that is sensitive to consumer mental health and housing needs.

A list of **PATH** service providers may be found in Appendix C.❖

## IV. Activities of the Office of Homeless and Housing Services

With overall responsibility for supporting homeless shelter activities with the State's Continuums of Care (CoC), the New Hampshire Department of Health and Human Services, Division of Behavioral Health, Office of Homeless and Housing Services (OHHS), provides leadership, resources, and coordination among a large group of emergency shelter providers. Some OHHS activities undertaken or completed in the past year include:

- "Bringing the Pieces Together," the annual New Hampshire Homeless Service Providers Conference held August 28th – 30th at North Conway, once again gave the State's government-provider community an opportunity to confer on issues and share insight. The conference was attended by 116 persons representing 57 providers

and government agencies. Keynote speaker Michael Stoops, National Coalition for the Homeless director of community organizing, told the group that the challenge of homelessness in America over the last 30 years has evolved into a struggle to prevent the arrest of homeless people for sitting on a sidewalk or sleeping in a public park. Decrying what he called the criminalization of homelessness, Stoops said, "There's something sick about a city such as New York that doesn't have a problem with people sleeping in the streets overnight so they can be first in line for Yankees tickets, but wants to arrest people for sleeping in the streets because they don't have a home to go to." Conference workshops included: *Working with Local Welfare, Teen*

**'How can any American watch this steady increase in the numbers of homeless people and not have some sense of "My God! What has this country become?" How can we not decide that this is a moral crisis equal to segregation or the Vietnam war, and how can we not insist that every day we take steps to do something?'**

— Michael Stoops, Director of Community Organizing,  
National Coalition for the Homeless

*Voices, Working with a Diverse Population Brain & Behavior: Understanding Addiction, and Care for the Caregivers.*

- The Division of Behavioral Health (DBH), through its OHHS, currently administers two housing-related programs through a network of nonprofit community agencies: the Housing Security Guarantee Program (HSGP) and the Rental Guarantee Program. Started in 1994, the HSGP is a security deposit guarantee program available to low-income families across the entire state. A non-cash voucher program, it is managed pursuant to RSA-126: 50-A, which states: “The inability of individual citizens to amass sufficient funds for housing security deposits contributes significantly to the problem of homelessness in the State of New Hampshire.” The housing security guarantees provided under the program allow low-income individuals and families opportunity to secure safe, affordable, permanent housing in New Hampshire’s low-vacancy, high-cost rental housing market. Persons seeking a security deposit guarantee can apply through one of 10 nonprofit agencies that administer the program. These agencies work in conjunction with private landlords, public housing agencies, transitional housing programs, outreach workers and others to ensure program availability to the entire state. The table following provides a status of the program, which has a default rate of 22%.

### **Housing Security Guarantee Program Statistics, 1994 Through 30 June 2002**

County	Number Of Guarantees	Amounts	Payments	Redeemed	Cancelled	Default	Balance
Belknap	221	\$ 31,236.00	\$ 3,921.10	\$ 1,106.19	\$ 4,138.81	\$ 6,583.32	\$ 16,632.02
Coos, Carroll & Grafton	201	\$ 79,441.00	\$ 4,757.81	\$ 7,335.09	\$ 11,705.91	\$ 12,495.00	\$ 50,482.28
Hillsborough	1,342	\$ 656,398.82	\$38,560.66	\$122,901.20	\$131,055.86	\$141,034.66	\$231,317.88
Merrimack	551	\$ 177,930.50	\$ 9,555.00	\$ 34,047.00	\$ 45,691.74	\$ 63,573.76	\$ 25,063.00
Rockingham	148	\$ 60,055.20	\$13,237.00	\$ 500.00	\$ 17,219.00	\$ 8,433.00	\$ 21,166.20
Strafford	141	\$ 31,613.50	\$ 4,371.00	\$ 1,724.00	\$ 16,451.29	\$ 3,653.71	\$ 32,119.50
Sullivan & Cheshire	240	\$ 98,633.83	\$10,120.78	\$ 19,905.60	\$ 7,385.74	\$ 12,979.92	\$ 68,147.39
<b>Totals</b>	<b>2,844</b>	<b>\$1,135,308.85</b>	<b>\$84,523.35</b>	<b>\$187,519.08</b>	<b>\$233,648.35</b>	<b>\$248,753.37</b>	<b>\$444,928.27</b>

- The Rental Guarantee Program (RGP) is the OHHS companion program to the HSGP. It is being implemented in Hillsborough County by The Way Home and in Merrimack County by the New Hampshire Help Line. The RGP pilot phase, begun October 1, 2000, was extended through December 31, 2001 in order to provide better benchmark data and clearer insight into needs. To assist needy families, the Division of Family Assistance has allocated up to \$1 million per year from the Temporary Assistance for Needy Families (TANF) Program to support the RGP. The RGP's objective is to assure payment of a maximum of three months fair-market rent as incentive to landlords to rent to homeless families or pregnant women. To coordinate these related efforts in support of families who are homeless or are at risk of homelessness, the RGP and HSGP are administered by the same community service network.
- Complying with a HUD mandate, the OHHS coordinated development and submittal of a statewide project to implement a Homeless Management Information System (HMIS). The HMIS will enable automated client-level reporting of homeless data by a FFY 2004 deadline, and stands to be 80% funded by HUD's Supportive Housing Program. With interlocking budgets, the project was submitted simultaneously in the 2002 HUD SuperNOFA applications of the three New Hampshire Continua of Care. The project will provide computer hardware, software, training, and technical operations effort for a system designed to compile secure client-level data (using unique identifiers rather than names) and facilitate resource referrals within and among the Greater Manchester, Greater Nashua, and Balance of State Continua of Care.

## **V. Homeless Assistance Developments**

A number of developments in SFY '02 deserve mention in this Annual Report. Some noteworthy expansions of emergency and transitional housing services are taking place, and some legislative developments affect certain aspects of the State's homelessness problem:

**‘What do you do when all your dreams shatter? Every time you turn around everything reminds you of what’s now gone. The people you talk to just seem to rub it in.’**

**— From a notebook abandoned by a homeless teen at a woods site near Portsmouth**

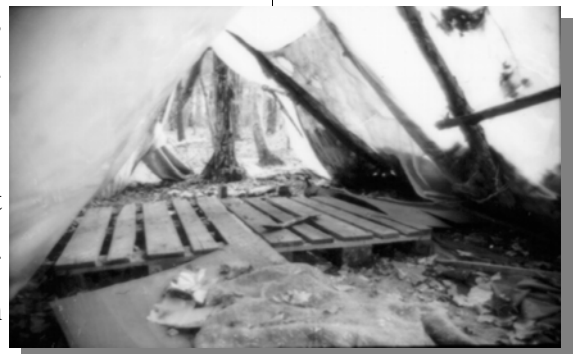
- The federal McKinney-Vento Homeless Assistance Act, as reauthorized in January 2002, now ensures educational rights and protections for homeless children and youth. The new law requires local school

districts to remove barriers to the immediate enrollment and retention of students in homeless situations, keep homeless students in their schools of origin (unless parent or guardian objects), and to provide transportation as required in support of that requirement. It also mandates appointment of a liaison for homeless students within local school districts to promote their

academic success and link students and their families to eligible school and community services, including health services. And it makes all homeless students eligible for Title I services, regardless of current academic performance.

- In August, the federal Health Resources & Services Administration awarded a \$260,000 one-year grant funding the Seacoast’s Healthcare for the Homeless project, a mobile outreach project seeking to bring homeless uninsured and under-insured individuals and families into the community health care system. The project represents a collaboration of Portsmouth-based Alliance for Community Health and The Strafford Network, based in Rochester. Using two mobile health vans, being refitted with grant funds, the project will be operated by Families First of the Greater Seacoast in conjunction with AIDS Response Seacoast, Exeter Hospital, Southeastern NH Services, Lamprey Health Care, and the Avis Goodwin Community Health Center, according to Susan Turner of the Rockingham County CAP. Through the project, homeless residents will receive family primary medical and dental care and specialty referrals, and mental health and/or substance abuse services and referrals to mainstream programs and health care providers.

- Angie's Shelter For Women opened in April at 434 Union Street in Manchester. The 26-bed shelter operates as an adjunct to New Horizons for New Hampshire serving single women undergoing treatment for substance abuse.
- In April 2002, The Haymarket People's Fund awarded a \$10,000 grant to Under The Bridge, a Manchester-based independent media project which seeks to bring the homeless voice to the public. Through its newspaper, *Under The Bridge Street News NH*, and other activities, Under The Bridge seeks to publicize the movement to end homelessness.
- The federal Chaffee Foster Care Independence Act enabled the Division for Children, Youth & Families (DCYF) to invest \$100,000 in the Beacon Partnership, a Manchester project serving homeless young adults under the age of 21. Services provided to residents include educational planning, vocational assessment/career planning, group living and socialization, and recreation. The project represents a collaboration of the Alliance for Community Support/Project Renew, the DCYF Independent Living and Transitional Living Programs, Merrimack Valley Assistance Program, and Easter Seals Society of NH.
- Manchester-based Families In Transition opened the doors to its Millyard II Transitional Housing project in May. The new facility provides 19 living units plus one interim unit for homeless women, with or without children. It also features a children's room, laundry, an office for the Mobile Community Health Team, and community meeting space for life skills workshops and group therapies.
- Two new winter emergency shelters operated last winter with state funding. The Salvation Army operated a 28-bed shelter serving homeless families in



Bill Guinther photo



**‘We have exhausted all of our means, pulled all the strings we could. I even confided in my employer and they are doing all they can do. What in the world are we to do in this state when the “services” provided to us do not really provide us with service? Yes, I know: “Look for an apartment, when you find one call us back and then we can help.” Is that the bedtime story we should tell our kids when we are trying to keep warm these cold nights living in the car? Is there absolutely no one that can find us emergency, temporary housing until we find the landlord that will rent to us?’**

**— From a letter received by the Governor’s office**

Concord, and Southwestern Community Services operated a 32-bed shelter in Claremont serving homeless families and single women. Operation of the latter shelter had to be extended for four months due to high need.

- The SB21 Commission, established last year, is developing recommendations for legislation to reduce regulatory barriers to, and provide possible incentives for, the creation of affordable housing. The commission, with government, business, and nonprofit membership, is charged with recommending legislation that can accomplish the goal without compromising the legitimate environmental, health, and safety concerns of local communities. The commission’s report is anticipated in late 2002.

- The New Hampshire Discharge Planning Task Force in August issued a draft policy calling on publicly funded institutions or systems of care to develop and implement “discharge coordination policies and protocols for the discharge of persons in their custody or care to prevent such discharge from immediately resulting in homelessness to the maximum extent practicable and where appropriate....” The recommendation requires promulgation of

institutional discharge policies within six months of adoption of the task force’s proposed policy.

- Providers of homeless youth programs in the state have been meeting to draft licensing rules required by HB 648-FN enacted last year. The new law recognized that children aged 16 and 17 can in fact be homeless individuals, outside the ambit of the state’s child protection and juvenile justice statutes, and authorized licensing of homeless shelter programs serving that age group. Rule approval by the state will enable providers to be licensed to serve the needs of this homeless sub-population.

- HB1109, enacted in May, established a commission to recommend statutory and administrative changes which would improve the delivery of local assistance to those in need. The commission's report, due by November 1, 2003, will address problems relating to homeless assistance, standardization of welfare guidelines (including qualifications of local welfare administrators), and disputes between municipalities.
- In April, SB102 was enacted, establishing a \$5 million bond appropriation for the State's Affordable Housing Fund in State Fiscal Years 2003 and 2004.❖

## **VI. State-Funded Homeless & Housing Activities Service Summary, SFY 2002**

### ***Shelter Service Totals***

6,805 persons sheltered (Emergency and Transitional)

#### ***Of persons sheltered there were:***

4,124 single adults  
 1,068 adults in families  
     710 adults in one-parent families  
     302 adults in two-parent families  
     48 individual adults in families without children  
     8 non-parent adults in families  
 1,613 children in the above one- and two-parent families

#### ***... Including:***

931 persons with known Mental Illness  
 1,811 persons with Substance Abuse  
 453 persons with Dual Diagnosis  
 743 victims of Domestic Violence  
 428 Veterans  
 72 persons with HIV/AIDS

### ***Special Needs Programs***

3,788 Homeless Outreach/Intervention clients served (within Balance of State Continuum of Care only)  
     93 Permanent Housing for Homeless Handicapped persons served  
 747 Projects for Assistance in Transition from Homelessness (PATH) persons outreached (FFY 2001)  
     564 PATH clients enrolled (FFY 2001)  
 1,267 Transitional Shelter with Supportive Services persons served

### ***Housing Security Guarantee Program***

588 housing certificates issued

## Appendix A, Notes on the Statistics

1. These statistics represent only those providers funded by or through the State. There are other New Hampshire emergency and homeless shelter service providers not reflected in our statistics. Furthermore,

*'I remember a year ago today. I was living in a tent behind D'Angelo's and sweeping the parking lot to get free food. I really started to feel comfortable doing those types of things. All of the things I used to do before I was in the New Start Program were putting my body and my mind in a nowhere place. There were some people that wanted to help but there is a difference between wanting to help and being in a position to help. Adding to that, I felt I wore out my welcome as soon as I walked in the door.'*

*One day my mother told me about a program that might be able to help me. I was in a program before and the whole time I was homeless I told myself I would never give up on another good chance. So I called and got another good chance. My intuitiveness started to take over and overall I learned the most important thing, the need and the want to better myself.... So I thank you Cindy [Wright] for having me in the program because even though I can seem smart about problems, I still need someone over my shoulder helping and guiding me there.'*

— Nic Chabot, New Start Community Action Program

the State doesn't always fund the same providers every year. Changes in shelter capacity due to remodeling, expansion, or natural disasters also affect the reporting base.

2. Some of the formats and definitions of our reporting instruments have changed as we progress toward our goal of receiving more detailed information and reflect changing federal definitions of some data elements. From time to time, confusion over earlier definitions has led the Office of Homeless and Housing Services to amend reporting instructions, leading some providers to slightly change the way they report. Such changes can make the comparison of certain homeless statistics over time a difficult process.

3. Some concepts, like shelter capacity, cannot be quantified precisely because they

are affected by numerous factors. For example, women cannot be housed in a men's single shelter, nor can the general homeless population be housed in a specialty shelter. Many of our providers serve families. They use apartments and move beds in and out daily, according to family size, making the concept of capacity dynamic. Moreover, family sizes supported by Domestic Violence providers typically differ from those supported in Transitional housing. Thus, "capacity" represents a theoretical maximum and providers generally

use averages to report this statistic.

4. Geographical distribution numbers reflect relative capacity rather than relative need. When programs are full, people requiring services have to seek whatever space there is, perhaps even in a different part of the State.
5. The State Fiscal Year runs from July 1<sup>st</sup> to the following June 30<sup>th</sup>. However, several programs, especially those receiving federal funds, are required to report by different fiscal years. The Federal Fiscal Year (FFY) runs from October 1<sup>st</sup> to the following September 30<sup>th</sup>. Yet Congress imposes different fiscal years on different federal programs – and even on the same program over time – sometimes unrelated to the FFY.
6. During the life of this commission shelter providers have been requested to report by different time periods. Initially, quarterly statistics were required without an annual consolidation, leaving the potential for overlap between quarters. Since SFY '99, provider reports are submitted semi-annually, with the second report summarizing the entire fiscal year. We believe that this schedule has eliminated quarterly reporting overlap.❖



*Bill Guinther photo*

## Appendix B, Homeless and Housing Glossary of Terms

*Note:* This glossary provides an overview of terminology common to the issue of New Hampshire homelessness and federal housing programs. Not all terms are used in this Annual Report.

**Affordable Housing** - Housing where the occupant is paying no more than 30% of income for gross housing costs, including utilities.

**APR** - Annual Progress Report

**CAA** - Community Action Agency

**CAP** - Community Action Program

**CDBG** - Community Development Block Grant

**Congregate Housing** - Low income housing, predominately for elderly, handicapped, disabled, or displaced families

**Consolidated Plan** - State application to HUD for funding

**Continuum of Care** - Coordinated community-based process of identifying needs and building a system to address those needs.

**CMHS** - US Center for Mental Health Services.

**CY** - Calendar Year: January 1 to December 31.

**DHHS** - New Hampshire Department of Health and Human Services

**Dual Diagnosed** - (PATH definition) Co-occurring serious mental illness and substance abuse.

**DV Coalition** - New Hampshire Domestic Violence Coalition.

**Entitlement Municipality** - The cities of Manchester, Nashua, Portsmouth, Dover, and Rochester, which receive funds directly from HUD under section 106(b) of the federal act.

**ESG** - Emergency Shelter Grant, State of New Hampshire or federal McKinney.

**Extremely Low Income** - A household whose income is at or below 30% of the median family income of the area.

**FFY** - Federal Fiscal Year: October 1 to September 30.

**HHS** - The US Department of Health and Human Services

**HOME** - Home Investment Partnerships Program.

**HSGP** - Housing Security Guarantee Program

**HOIP** - Statewide Homeless Outreach/Intervention Project

**HOPWA** - Housing Opportunities for Persons With Aids

**HUD** - US Department of Housing and Urban Development

**Living Conditions, Homeless -  
Unsheltered**

Abandoned Building

Automobile

Bridge

Hallway

Highway

Homemade Shelter

Public Building  
Street  
Substandard Housing  
Tent  
Transportation Facilities  
Woods

**Publicly Sheltered**

Emergency Shelter  
Foster Homes  
Group Homes  
Jail/Prison  
Specialty Shelter

**Privately Sheltered**

Family or Friends (Doubled up)  
Home  
Hospital or Medical Clinic/Center  
Hotel/Motel  
Rental Housing

**Low Income** - A household whose income is at or below 80% of the median family income of the area.

**Moderate Income** - A household whose income is at or below the median family income of the area.

**MFI** - Median Family Income, a household income level set by HUD at \$58,800 statewide in New Hampshire for 2002 (the nationwide MFI in 2002 is \$54,400). As many households earn less than that figure as earn more.

**NOFA** - Notice Of Funding Availability

**OHHS** – the NH DHHS Office of Homeless and Housing Services

**PATH** - Projects for Assistance in Transition from Homelessness

**PHH** - Permanent Housing for Homeless Handicapped.

**PRA** - Project-based Rental Assistance

**RGP** – Rental Guarantee Program

**S+C** - Shelter Plus Care

**SFY** - State Fiscal Year: July 1 to June 30.

**SGY** - State Housing Security Guarantee Fiscal Year: December 1 to November 30.

**SHP** - Supportive Housing Program

**SNAP** - Special Needs Assistance Programs.

**SRA** - Sponsor-based Rental Assistance

**SRO** - Single Room Occupancy

**SS** - Supportive Services not in conjunction with housing.

**TANF** - Temporary Assistance for Needy Families

**TH** - Transitional Housing

**THH** - Transitional Housing for Homeless Handicapped

**TRA** - Tenant-based Rental Assistance

**Very Low Income** - A household whose income is at or below 50% of the median income of the area.❖

## Appendix C, Service Provider Matrix



*Kylah, aged 2, lives with her mother in the community program of Families In Transition. Her mother has graduated from the program and is maintaining her housing and employment. (Photo by Raysa Ortega used with the mother's permission.)*

# APPENDIX C

## Service Provider Matrix, 2002 Annual Report of the Emergency Shelter & Homeless Coordination Commission

Providers And Addresses	Homeless Shelter Services				Homeless Prevention/ Intervention		Special Needs Program			
	Domestic Violence	Emergency Shelter	Transitional Shelter	Specialty Shelter	HSGP	Prevention/ Other	Outreach Intervention	Permanent Housing	Transitional Housing	PATH
<b>BELKNAP COUNTY</b>										
Community Action Program Belknap-Merrimack Counties PO Box 1016 Concord, NH 03302-1016 (603) 225-3295					X	X	X			
GENESIS-The Counseling Group McGrath Street 111 Church Street Laconia, NH 03246 (603) 524-1100								X		X
Laconia Area Community Land Trust, Inc. PO Box 6104 Laconia, NH 03247-6104 (603) 524-0747			X							
New Beginnings-A Women's Crisis Center PO Box 622 Laconia, NH 03247 (603) 528-6511	X									
Open Arms Outreach 756 Union Street Laconia, NH 03246 (603) 524-4580			X							
The Salvation Army-Laconia 177 Union Avenue Laconia, NH 03246 (603) 524-1834		X								



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Twin Rivers Community Corporation 608 W. Main Street Tilton, NH 03276 (603) 286-7710									X		
CARROLL COUNTY											
Northern NH Mental Health and Developmental Services •Gilpin House 87 Washington Street Conway, NH 03818 (603) 447-3347									X		
Starting Point: Services for Victims of Domestic and Sexual Violence PO Box 1972 Conway, NH 03818 (603) 356-7993	X										
Tri-County Community Action Program •Coos, Carroll, Grafton Counties 30 Exchange Street Berlin, NH 03570 (603) 752-7001 - 1-800-552-4617					X	X	X			X	
CHESHIRE COUNTY											
Monadnock Family Services 64 Main Street, Ste. 301 Keene, NH 03431-3701 (603) 357-5270										X	

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Southwestern Community Services (Keene) ●Monadnock Area Housing Coalition ●NEXT STEP Transitional Housing 69Z Island Street PO Box 603 Keene, NH 03431 (603) 352-7512		X	X		X	X	X		X		
Women’s Crisis Services of the Monadnock Region, Inc. 12 Court Street Keene, NH 03431-3402 (603) 352-3782	X										
COOS COUNTY											
Coos County Family Health Services, Inc. Response to Sexual & Domestic Violence 54 Willow Street Berlin, NH 03570 (603) 752-5679	X										
Tri-County Community Action Program ●Coos, Carroll, Grafton Counties ●Friendship House 30 Exchange Street Berlin, NH 03570 (603) 752-7001 – 1-800-552-4617					X	X	X		X	X	

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Tri-County Community Action Program ●Lynsey House Shelter 56 Prospect Street Lancaster, NH 03584 (603) 788-2344		X									
GRAFTON COUNTY											
Headrest, Inc. PO Box 247 Lebanon, NH 03766-0247 (603) 448-4872				X							
Support Center of Burch House PO Box 965 Littleton, NH 03561 (603) 444-06254	X										
Tri-County Community Action Program ●Coos, Carroll, Grafton Counties ●Friendship House 30 Exchange Street Berlin, NH 03570 (603) 752-7001 - 1-800-552-4617					X	X	X		X	X	
Tri-County Community Action Program ●Pemi-Bridge House Shelter 41 Green Street Plymouth, NH 03223 (603) 536-7631		X									

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	Domestic Violence	Emergency Shelter	Transitional Shelter	Specialty Shelter	HSGP	Prevention/ Other	Outreach Intervention	Permanent Housing	Transitional Housing	PATH	
Voices Against Violence PO Box 53 Plymouth, NH 03264 (603) 536-3423	X										
West Central Behavioral Health 2 Whipple Place, Ste. 202 Lebanon, NH 03766 (603) 448-0126									X	X	
WISE (Women’s Information & Services) 79 Hanover Street, Ste. 1 Lebanon, NH 03766 (603) 448-5922	X										
HILLSBOROUGH COUNTY											
Child and Family Services of NH 99 Hanover Street PO Box 448 Manchester, NH 03105 (603) 668-1920				X							
Community Council of Nashua 7 Prospect Street Nashua, NH 03060 (603) 889-6147										X	
Families In Transition, Inc. 122 Market Street Manchester, NH 03101 (603) 641-9441 •Amherst Street •Spruce Street Apartments			X X					X			

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Greater Nashua Council on Alcoholism ●Keystone Hall Pine Street Extension Nashua, NH 03060 (603) 881-4848				X							
Harbor Homes ●Amherst Street 12 Amherst Street Nashua, NH 03064 (603) 882-3616		X						X			
Helping Hands Outreach Ministries, Inc. 50 Lowell Street PO Box 3551 Manchester, NH 03105-3551 (603) 623-8778			X								
Manchester Emergency Housing, Inc. 11 Liberty Street Manchester, NH 03104 (603) 627-2636		X									
Nashua Pastoral Care Center 7 Concord Street Nashua, NH 03064 (603) 886-2866			X		X						
Nashua Soup Kitchen and Shelter PO Box 3116 Nashua, NH 03061-3116 (603) 889-7770		X	X								

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	Domestic Violence	Emergency Shelter	Transitional Shelter	Specialty Shelter	HSGP	Prevention/ Other	Outreach Intervention	Permanent Housing	Transitional Housing	PATH
<b>New Hampshire Legal Assistance</b> 1361 Elm Street, Ste. 307 Manchester, NH 03101 <b>668-2900 or 1-800-562-3174</b>						<b>X</b>				
<b>New Horizons for New Hampshire</b> •Emergency Shelter •Angie's Shelter For Women 199 Manchester Street Manchester, NH 03103 (603) 668-1877		<b>X</b> <b>X</b>								
<b>Rape and Assault Support Services</b> 33 Main Street, Ste. 500 PO Box 217 Nashua, NH 03061-0217 (603) 889-0858	<b>X</b>									
<b>St. John Neuman</b> 708 Milford Road 101-A Merrimack, NH 03054 (603) 424-5685						<b>X</b>				
<b>Southern New Hampshire Services, Inc.</b> PO Box 5040 Manchester, NH 03108 (603) 668-8010						<b>X</b>				
<b>The Mental Health Center of Greater Manchester</b> •Gemini House 401 Cypress Street Manchester, NH 03103-3628 (603) 668-4111								<b>X</b>		<b>X</b>

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	Domestic Violence	Emergency Shelter	Transitional Shelter	Specialty Shelter	HSGP	Prevention/ Other	Outreach Intervention	Permanent Housing	Transitional Housing	PATH	
The Way Home 214 Spruce Street Manchester, NH 03103 (603) 627-3491			X		X	X					
YWCA Crisis Service •Emily’s Place 72 Concord Street Manchester, NH 03101 (603) 625-5785	X										
MERRIMACK COUNTY											
Community Action Program Belknap-Merrimack Counties •New Start Program PO Box 1016 Concord, NH 03302-1016 (603) 225-3295			X		X	X	X				
Community Services Council of NH •Franklin Falls Farm (603) 225-9694 •New Hampshire Helpline 1-800-852-3388 •Unite To Help (603) 225-9694 PO Box 2338 Concord, NH 03302-2338 (603) 225-9000					X	X  X		X			
Merrimack County Rape and Domestic Violence Crisis Center PO Box 1344 Concord, NH 03302-1344 (603) 225-7376	X										

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Merrimack Valley Assistance Program* PO Box 882 Concord, NH 03302-0882 (603) 226-0607						X					
*The Merrimack Valley Assistance Program is the only HOPWA program.											
New Hampshire Coalition Against Domestic And Sexual Violence PO Box 353 Concord, NH 03302 (603) 224-8893	X**										
**This is an umbrella organization for domestic violence shelters and services.											
New Hampshire Hospital 105 Pleasant Street Concord, NH 03301 (603) 271-5300 or 1-800-852-3345									X		
Riverbend Community Mental Health Services, Inc. 5 Market Lane PO Box 2032 Concord, NH 03302-2032 (603) 228-1551										X	
The Friends Emergency Housing Program 30 Thompson Street Concord, NH 03301 (603) 228-1462		X									
The Salvation Army (including WES) ●McKenna House 100 S. Fruit Street Concord, NH 03301 (603) 225-5587		X X									

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ROCKINGHAM COUNTY											
Seacoast Task Force On Family Violence	X										
●A Safe Place 64 Greenleaf Woods Unit 101 Portsmouth, NH 03801 (603) 436-4619											
AIDS Response to the Seacoast 1 Junkins Avenue Portsmouth, NH 03801 (603) 433-5377						X					
CLM Behavioral Health Systems								X			
●Beaver Lake Lodge Salem Professional Park 44 Stiles Road Salem, NH 03051 (603) 893-3548											
Cross Roads House 600 Lafayette Road Portsmouth, NH 03801 (603) 436-2218		X	X								
New Generation, Inc. 568 Portsmouth Avenue PO Box 676 Greenland, NH 03840 (603) 436-4989				X							
Rockingham Community Action, Inc. 7 Junkins Avenue Portsmouth, NH 03801 (603) 431-2911					X	X	X				

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	Domestic Violence	Emergency Shelter	Transitional Shelter	Specialty Shelter	HSGP	Prevention/ Other	Outreach Intervention	Permanent Housing	Transitional Housing	PATH	
Seacoast Mental Health Center ●Springbrook 1145 Sagamore Avenue Portsmouth, NH 03801 (603) 431-6703								X		X	
STRAFFORD COUNTY											
Behavioral Health & Developmental Services of Strafford County ●Tide View Estates ●Rochester Family Housing ●Rochester Homeless Housing 113 Crosby Road, Ste. 1 Dover, NH 03820 (603) 749-4015								X  X	X		
My Friend's Place 368 Washington Street Dover, NH 03820 (603) 749-3017		X							X		
Strafford County Community Action Committee County Farm Road, PO Box 160 Dover, NH 03821-0160 (603) 749-1334					X	X	X				
SULLIVAN COUNTY											
Friends of Veterans c/o Vets Center Gilman Office Complex #2 White River Junction, VT 05001 (802) 295-2908						X					

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	Domestic Violence	Emergency Shelter	Transitional Shelter	Specialty Shelter	HSGP	Prevention/ Other	Outreach Intervention	Permanent Housing	Transitional Housing	PATH	
Southwestern Community Services (including WES) PO Box 1338 Claremont, NH 03743 (603) 542-9528		X X	X		X	X	X		X		
Women's Supportive Services 11 School Street Claremont, NH 03743 (603) 543-0155	X										
Worcester County (MA) Veteran Hospice Homestead, Inc. 69 High Street Fitchburg, MA 01420 (978) 353-0234						X					